

# Employee Performance Appraisal



Employee Name \_\_\_\_\_ I.D. Number \_\_\_\_\_

Job Title \_\_\_\_\_ Manager Name \_\_\_\_\_

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**O** - Outstanding    **A** - Above Satisfactory    **S** - Satisfactory    **B** - Below Average    **U** - Unsatisfactory

## Evaluation

Communication Skills Rating \_\_\_\_\_

Knowledge of Job Rating \_\_\_\_\_

Knowledge of Company Rating \_\_\_\_\_

Initiative Rating \_\_\_\_\_

Problem Solving Skills Rating \_\_\_\_\_

Attendance Rating \_\_\_\_\_

Teamwork Rating \_\_\_\_\_

## Overall Performance

Rating:      Outstanding      Above Satisfactory      Satisfactory      Below Satisfactory      Unsatisfactory

Notes: \_\_\_\_\_

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By signing this form, you indicate that all information in this performance appraisal has been read through thoroughly and is understood. The employee's signature does not in any way indicate whether he/she agrees or disagrees with the content provided in this appraisal.

Employee \_\_\_\_\_ Date \_\_\_\_\_

Supervisor \_\_\_\_\_ Date \_\_\_\_\_

Manager \_\_\_\_\_ Date \_\_\_\_\_

Human Resources \_\_\_\_\_ Date \_\_\_\_\_